WITHDRAWAL FORM



Drop off or email to frontdesk@swimamericadavis.com

NOTE: Withdrawal forms must be received by the 25th of the month to avoid charges for the next month.

| TELL US ABOUT YOUR FAMILY | |
|--|---|
| Today's Date: | Swimmer(s) Name(s): |
| Parent's Name(s) | Telephone: |
| Email address: | |
| Date of Last Lesson: | |
| *Unless you are selecting | g a future month, you are paid through the current month. |
| Reason for leaving (chec | cone): Schedule Conflict Unsatisfactory Experience Moving out of the area Vacation Other — |
| (please explain): | |
| CANCELLING MID-M | ONTH |
| We do not offer refunds | By selecting the box below the remainder of the tuition may be donated to HOPE FLOATS, which provides swim lessons to |
| children living in poverty | within our community. |
| HOPE FLOATS DONATION | |
| | |
| AUTHORIZATION | |
| I understand that registration and auto-debit payment method will be canceled when SwimAmerica receives this Withdrawal Form. Withdrawals are final. If I wish to re-register my swimmer in the future, the same class day/time or instructor may not be available. I understand that fees I've already paid are not refundable. | |
| Parent Signature: | Date: |
| Would you like a □ call or an □ email to remind you to re-register? When: | |
| OFFICE USE ONLY: Lesson Day/ | ime Level Coach |
| NOTED IN COMPUTER | P# Copyright 2019 SwimAmerica Davis. All rights reserved Version 2.13 |
| NOTED IN CMD | HANGED TO CASH |